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SEP 29 2005

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29989 7590 07/28/2005

**HICKMAN PALERMO TRUONG & BECKER, LLP**  
**2055 GATEWAY PLACE**  
**SUITE 550**  
**SAN JOSE, CA 95110**

09/29/2005 HDESTA2 00000022 10648578

01 FC:2501 700.00 OP  
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Darci Sakamoto	(Depositor's name)
<i>Darci Sakamoto</i>	(Signature)
9/27/05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/648,578	03/25/2003	James Edwin Funk	60081-0011	4091

TITLE OF INVENTION: SAFETY TOOL FOR CONTAINING DEBRIS FROM ELECTRICAL WORK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	10/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MEREK, JOSEPH C	3727	220-495060

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Hickman Palermo

1. Truong & Becker LLP

2. \_\_\_\_\_

3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

James Edwin Funk  
 Michael Alan Fell

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ontario, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1302 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*John D. Henkhaus*

Date

9/27/05

Typed or printed name

John D. Henkhaus

Registration No.

42,656

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